

**State Trauma Care Committee Minutes**  
**August 8, 2005**  
**Wingate Inn, Helena**

**MEMBERS:**

**Present** Jim Bentler, John Bleicher, Mike Orcutt, Tim Sinton, William Taylor, Pauline Linnell, Charles Swannack, and Randall Colmes

**Absent** Mike McGree, Brad Pickhardt, Kirby Peden, Greg Moore, and Joe Hansen

**GUESTS:** Richard Mickelson, Stuart Reynolds, Elaine Schuchard, Jim DeTienne, Kim Todd, Pamela LaFountaine, Thomas Danenhowe, Chris Severson, Ron Martin, Sally Buckles, Dayle Perrin, Penny Clifton, and Dale Dallmann

**Handouts:**

- Agenda
- Minutes May 9, 2005 meeting
- Trauma Registry Reports
- Criteria for Consideration of Trauma Patient Transfer
- Triage and Transport Guidelines
- Facility Resource Criteria and designation site review reports
- NHTSA MT EMS System Assessment Findings for Trauma Objectives

**Discussion**

Previous Minutes

**Summary**

The Chemical Pak project was not completed as stated in the previous minutes, instead will be completed in October. The minutes with the noted change were approved. Discussion on whether STCC minutes are shared with others in the Dept. of Public Health and Human Services (DPHHS). Not at the present time, but will share these minutes following approval and any other applicable information with key DPHHS personnel in the future. Minutes should be sent to STCC members before the next meeting.

**Discussion**

STCC Appointments

**Summary**

The Governor's office has not made the appointments yet. The Governor requires a minimum of two names for each position to choose from. Not all the open representative positions had two people to choose from and the Governor's office offered assistance with obtaining additional candidates.

**Discussion**

RTAC Reports

**Summary**

**Central** – Tim Sinton reported that Trauma Nurse Core Course (TNCC) and Emergency Nursing Pediatric Course (ENPC) programs were held in the region, the prehospital subcommittee meeting discussing education was held, travel reimbursement issues discussed, and no case reviews were presented. Kim and Thom gave trauma and injury prevention presentations.

**Western** – John Bleicher reported that central medical dispatch was discussed and if implemented the consensus was there should be a person to talk to and not use a computer program. Inter-facility

transfer discussion held and recommendations made that trauma patients should always be admitted through the emergency department. Five case reviews were completed. Kalispell Regional Medical Center recently had an American College of Surgeons (ACS) consultation visit for Level III verification. Dr. Dunn from Harborview in Seattle will be doing all day training at St. Patrick's Hospital on November 11<sup>th</sup> for facility alcohol intervention program – everyone is welcome to attend. The EMSTS section is supporting this training and has requested that upon completion of the training, the problem, what is being done and how to track program success will be addressed and reported to the STCC. The western RTAC applied for a national education grant and was unsuccessful, EMSTS staff offered to review their application and make suggestions for future grants applications.

**Eastern** – reported by Penny Clifton noted that the education subcommittee is currently the only functioning sub-committee and they have started working on the 2006 Rocky Mountain Rural Trauma Symposium (RMRTS). The region has received requests for education from area facilities; Livingston is scheduled in August for the ACS Rural Trauma Team Development Course (RTTDC). Penny has agreed to report on this course at the next STCC meeting. Two case reviews completed. RTAC funds were requested to video tape the speakers to use for education at the RTAC meetings. One on trauma and the extremes of age was shown at the last RTAC meeting. The RTAC will evaluate and report the success of this educational method, and determine if the other RTACs and interested parties can view these tapes.

**RECOMMENDATION:** If recommendations for trauma performance improvement are made from case reviews or in other RTAC discussions, these recommendations must be reviewed to assure they are evidence based and reported at the next STCC meeting.

#### **Discussion**

Subcommittee Report  
Prevention/EMSC  
CHAIR: Kirby Peden

#### **Summary**

Thom Danenhowe reported new subcommittee members are Dale Dallmann from Western RTAC and Ellen Stinar from Central RTAC. Overview presented for EMSC and injury prevention programs with current funding available. Suicide is a major problem in Montana and the need for a press/resource packet and more QPR training identified. A national trainers course for QPR is being held in the spring.

#### **Discussion**

Subcommittee Report  
Public Advocacy &  
Legislation  
CHAIR: Jim Bentler

#### **Summary**

Reviewed trauma related laws that passed and failed during the last legislative session, need to start to look at issues for the 2007 session. Drs Orcutt and Maier and John Bleicher selected to meet with the current Governor about trauma issues. The subcommittee supports three regional staff and one part-time state trauma medical director. A trauma stakeholders meeting was recommended and approved by the STCC. The consensus is that the meeting will be

designed to address problem solving not problem finding. Dr. Orcutt will contact Dr. Jurkovich to see if he can attend / facilitate the meeting. The meeting will be planned for June 2006 in Helena. The next STCC meeting, bring ideas for individuals and groups who should be invited to attend.

### **Discussion**

Subcommittee Report  
Organization/Emergency  
Preparedness  
CHAIR: Tim Sinton

### **Summary**

Radio communication issues and DMAT team development are priorities for this subcommittee. Currently there are no criteria for a DMAT team and FEMA is not supporting new team formation, but forming a strike team may be a possibility.

Seattle is creating a strike team with Idaho and Montana may want to join with them on the team(s) development and criteria guidelines. Tim has agreed to speak with the EMS taskforce to coordinate efforts on this objective. Kalispell has a medical strike team for the Flathead area through their DES office and Dale will provide information so Tim may contact this team for possible coordination efforts.

Jim DeTienne Report

P25 radio compliance is required by 2013 per the FCC. Area consortiums in the state have been formed to develop plans and obtain funding for needed purchases. HRSA emergency preparedness funds are being used to assure P25 base stations are in each hospital and possibly purchase one mobile for each EMS service during the next grant period.

### **Discussion**

Hospital Preparedness  
Dayle Perrin

### **Summary**

A meeting was held last week to review hospital applications for \$13,000 to \$25,000 to fund preparedness projects with 48 of the 60 facilities submitted applications. The successful applicants will be notified this week. Shortly the Level C PPE procurement project will be complete. Montana's HRSA emergency preparedness grant has been reduced to \$1.8 million and guideline objectives revised this year. Funding for facility trauma consultation visits will not be continued. Dr. Reynolds has developed a medical consequence-planning lecture and will present it to RTACs and others as requested.

### **Discussion**

Subcommittee Report  
Education  
CHAIR: John Bleicher

### **Summary**

Overview of trauma education topics addressed in sub-committee ACS RTTDC course, Montana's Trauma TEAM course, and the Society of Trauma Nurses' course, and Advanced Trauma Life Support (ATLS). The sub-committee voted and recommended that individual facilities are encouraged to provide trauma education in their region but that system type courses such as RTTDC and the MT Trauma TEAM course be coordinated and provided through the RTAC. Flyers for the Montana Trauma System conference that has been expanded to include medical directors and held prior to the RMRTS were provided. It was requested and agreed to that links for online education, provided to Jim DeTienne, be placed on the State EMSTS website for access by everyone.

**Discussion**

Subcommittee Report  
Information Systems/  
Performance Improvement  
CHAIR: Brad Pickhardt

**Summary**

Pamela LaFontaine reviewed trauma service summary reports by region and State. Richard Mickelson reported the subcommittee requested clarification and additional information for the next meeting. Montana was not able to submit data to the National Trauma Databank as the completion of the business agreement was met with many roadblocks but will try again next year. The current Collector software and the data that was converted from the Cales program to Collector are being checked by Pam to assure accuracy. For performance improvement purposes, the sub-committee would like to obtain information on the amount of time a patient is in a referral facility before it is determined they are to be transferred and not just the time the patient left the facility which is currently being reported. Discussion of how to handle patients who are transferred and possibly reported by both facilities to keep down duplication and falsely increase counts was held. Currently this cannot be tracked in the MT system trauma registry.

**Discussion**

Trauma Rules Update  
Kim Todd

**Summary**

Trauma rules are almost completed in the DPHHS' legal department. Transfer and triage criteria reviewed for possible inclusion in the rules. A motion to include transfer criteria, previously adopted in each RTAC, in the current rules was made and approved. The current trauma statute makes all information used for designation public. Due to the confidential nature of a site visit report (both state and ACS) containing medical record review, it was agreed that such a report be made for performance improvement by the facility alone. Possible reports that could be used to determine facility designation and were appropriate for public view were reviewed and a version selected and approved by the STCC. It was also agreed that efforts to revise the statute to make this report confidential in the next legislative session.

**Discussion**

EMS & Trauma Systems  
Update  
Jim DeTienne

**Summary**

National Highway Traffic Safety assessment of the MT EMS system was completed. The EMS Taskforce and the STCC were provided the assessment and recommendations for use in their planning process. The EMSTS is developing a new database (OMAR/OPHI). Part of this web-based database will be the volunteer registry for disaster relief registry. A web-based medical resources database is being setup and the initial development meeting will be September 23. This is not a central medical dispatch but offers the ability to check on resources electronically. Data collection from EMS agencies is another part of the database and is soon ready for alpha testing. Jennie Nemec, RN has been hired as a contractor for the trauma system. She will be starting work with EMSTS in September and job responsibilities are yet to be determined.

**Discussion**

Next Meeting

**Summary**

November 14, 2005